

Douglas A. Ducey, Governor

Arizona State Veterinary Medical Examining Board 9535 E. Doubletree Ranch Road, Suite 100 Scottsdale, AZ 85258

Phone: 602-364-1PET(1738) ◆ Fax: 602-364-1039

vetboard.az.gov Victoria Whitmore, Executive Director

Dear Certified Veterinary Technician Applicant:

The Arizona State (hereafter known as the "State") examination will be administered in April, August and December in 2014. You must apply through the State even if you are only taking the Veterinary Technician National Examination (VTNE). The State application fee is \$150.00 whether you are taking the VTNE, the State exam or both, and is payable by cash, cashier's check or money order only to the Arizona Veterinary Medical Examining Board (AZVMEB). Applicants who are taking the VTNE exam must register with the American Association of Veterinary State Boards (AAVSB) and pay the registration fee of \$300.00 (credit card payment required to the AAVSB) online at www.aavsb.org.

IMPORTANT CHANGES:

- As of July 29, 2010, applicants for the VTNE or State exam <u>must</u> be graduates of a Veterinary Technology program accredited by the AVMA or approved by the Board.
- > The VTNE exam is Computer Based Testing (CBT) and will be administered at Prometric testing centers.
- An applicant who is certified/licensed in another state is <u>not</u> required to retake the VTNE if the applicant can provide all of the following:
 - Proof that the applicant's original VTNE score meets the minimum score required by the Board,
 - · Proof that the applicant holds an active license/certification in good standing in another state or in Canada, and
 - Proof of employment as a veterinary technician in two of the preceding four years or four of the preceding seven years.

All State applications for the VTNE and/or State <u>must be complete</u> and <u>received</u> in the State Board office no later than 65 days before the State exam date (postmarked dates are not considered). Office hours are from 8:00 a.m. to 5:00 p.m. Monday through Friday. To assist in preparing for the VTNE exam, a copy of the "Candidate Information Booklet" can be obtained at the website: <u>www.aavsb.org</u>. For the State exam, the Arizona Revised Statutes and Arizona Administrative Code can be found at our website: <u>www.vetboard.az.gov</u>.

If you have taken and passed the VTNE in another state, please have your score transferred to Arizona through the AAVSB. Please go to www.aavsb.org to complete the online score transfer application. A converted score of 70 is required to pass both the VTNE as well as the State exam.

Please note effective January 2006, the AAVSB policy is that you may only take the VTNE exam 5 times in 5 years. If you are uncertain of your status, contact the AAVSB at (877) 698-8482 before you submit your application to our office. Your monies <u>WILL NOT be refunded</u> if you submit your application fee to our office and you are not eligible to sit for the VTNE.

The following study materials, in addition to various other veterinary journals and publications, may be of assistance to you in preparing for the exam and may be purchased at bookstores throughout Arizona or by visiting an online book store:

- > Clinical Textbook for Veterinary Technicians: Dennis M. McCurnin
- Review Questions and Answers for Veterinary Technicians: Thomas P. Colville

Questions on the State exam will include: Regulatory and Law derived from the Arizona Revised Statutes (Amended 2012) and Arizona Administrative Code (Revised November 2008). Questions may also include the following areas: Anatomy, Vocabulary, Physiology, Clinical Pathology, Parasitology, Pathology, Nutrition, Small Animal Medicine, Large Animal Medicine, Exotics, Anesthesiology, Client Relations, Cardiology, Nursing, Pharmacology, Immunology, Surgery, Infectious Diseases, Radiology, Microbiology, Ophthalmology, Toxicology, Diseases and other Hazards indigenous to the Southwest and Laboratory Procedures.

When completing the Statement of Citizenship form, <u>if you have had a name change</u>, legal documents such as a marriage certificate, divorce decree, or a court document, must also be submitted. Driver's licenses and Social Security cards are not considered acceptable for this purpose. A copy of government issued photo identification in addition to your proof of citizenship is also required. A driver's license is acceptable for this requirement. A valid passport would cover the citizenship and government issued photo identification requirement.

An individual with a disability, who, as a result of the disability, requires this application to be in an alternative format, may contact the Board's Americans with Disability coordinator at (602) 364-1738, or Voice Relay Service (800) 842-4681 or TTY at (800) 367-8939 to make their needs known.

Should you have any questions or require further assistance, please call our Licensing Administrator at (602) 542-8166.

Sincerely,

Victoria Whitmore

Victoria Whitmore Executive Director

INSTRUCTIONS FOR VETERINARY TECHNICIAN APPLICATION

Pursuant to Arizona Revised Statutes §32-2242, a person desiring to be certified as a veterinary technician shall make a written application to the Board upon a form furnished by the Board. The applicant shall be of good moral character and at least eighteen years of age and shall furnish satisfactory evidence of graduation from a two-year curriculum in veterinary technology, or the equivalent of such graduation as determined by the Board in a college or other institution approved by the Board.

Materials Required For Your File:

| | 1. | Notarized Application Form (Date of signature and notarization date must match.) |
|----------|--------|---|
| | t F | A non-refundable fee of \$150. This fee must be paid by cashier's check or money order made payable to Arizona State Veterinary Medical Examining Board (AZVMEB). Cash (exact amount) is accepted in person at the Board office. WE DO NOT ACCEPT PERSONAL CHECKS, BUSINESS CHECKS OR CREDIT CARDS. |
| | 3. | A photograph taken within the last six months, preferably passport size. |
| | | Typewritten letter to the Board or an updated résumé giving background information, experience and qualification. |
| | r | Three Moral Character Reference Forms from persons not related to you and who have known you a minimum of 3 years. A copy of the required form is enclosed. (Person completing form must submit to this Board office directly.) |
| | 6. | "Arizona Statement of Citizenship and Alien Status for State Public Benefits" - Form included in this packet |
| | | Documentation proving U.S. citizenship. The name on the documentation must match the name of applicant. If different, please submit supporting documentation, such as a marriage certificate, divorce decree, etc. Refer to the "EVIDENCE OF U.S. CITIZENSHIP, U.S. NATIONAL STATUS, OR ALIEN STATUS" list in this packet. |
| | 8. | In addition to your proof of citizenship documents, you must also submit a government issued photo identification. Examples: U.S. Passport, driver's license, etc. If your proof of citizenship has a photo on it, that will meet this requirement. |
| | | An official final transcript from an AVMA accredited 2-year Veterinary Technology curriculum must be sent directly to this Board by the school from which you graduated. Note: If you are graduating within 30 days of the exam, you will need to request a letter from the Dean of your school to be sent to our office, stating you are in good standing and the expected date of your graduation. |
| If trans | sfer | ring from another state you will need these additional items to waive retaking the VTNE: |
| | 10. | Please contact the AAVSB and have your VTNE score transferred to our office. |
| | 11. | Provide certificate verification sent directly from the state(s) you are/were certified in, showing your status. |
| | 12. | Provide proof of employment as a veterinary technician for two of the preceding four years or four of the preceding seven years. |

CERTIFIED VETERINARIAN TECHNICIAN EXAMINATION DATES & DEADLINES

<u>STATE</u> <u>VTNE</u>

| Exam Date | State Application Deadline | Exam Window | AAVSB Payment Deadline |
|-----------|----------------------------|---------------------|-------------------------------|
| 04/10/15 | 02/04/15 | 03/15/15 - 04/15/15 | 02/15/15 |
| 08/07/15 | 06/04/15 | 07/15/15 – 08/15/15 | 06/15/15 |
| 12/11/15 | 10/07/15 | 11/15/15 – 12/15/15 | 10/15/15 |

^{*}IT IS RECOMMENDED THAT YOU SUBMIT YOUR APPLICATION 2-3 WEEKS PRIOR TO DEADLINE TO ENSURE COMPLETION BY THAT DEADLINE DATE.

REMEMBER: IF YOU ARE ONLY TAKING THE VTNE YOU MUST STILL APPLY THROUGH THE STATE, AS WELL AS, THE AAVSB. THE STATE APPLICATION DEADLINE APPLIES TO BOTH THE VTNE AND STATE EXAM.

COMPLETED APPLICATIONS MUST BE RECEIVED AT THE FOLLOWING ADDRESS AT LEAST 65 DAYS BEFORE THE NEXT SCHEDULED EXAMINATION.

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vetboard.az.gov Victoria Whitmore, Executive Director

APPLICATION FOR VETERINARY TECHNICIAN CERTIFICATION

Applicant is required to enclose with this application, payment of \$150.00 (Application/Examination Fee) payable in U.S. dollars by **money order or cashier's check** to Arizona State Veterinary Medical Examining Board. **Cash** (exact amount) is accepted in person at the Board office. **This fee is not refundable.**

Alternative Format for Submitting Application

An individual with a disability who, as a result of the disability requires this application to be in an alternative format, may contact the Board's Americans with Disability coordinator at (602) 364-1738, or Voice Relay Service (800) 842-4681 or TTY at (800) 367-8939 to make their needs known

| 4681 or TTY at (800) 367-8939 to make their needs known. | | | |
|--|---|--|--|
| to Article 4, Arizona Revised the Board to obtain informat shall make an oath as to acknowledge that any falsi | ation as a Certified Veterinary Technical Statutes §32-2242, et.seq. I undersion from any licensing agency or boars the contents of my application and fication in my application to the Board may report any falsification of information. | rstand the filing of this applic rd in the United States or and nd credentials submitted to pard is adequate cause by rmation to other licensing age | by examination pursuant lation grants authority to other country; and that I the Board and that I the Board to deny my |
| INITIAL APPLICATION: | ~ PLEASE CHECK (Select this one if first time applying for | | exams. |
| INITIAL APPLICATION: Select this one if first time applying for State and National (VTNE) exams. REAPPLICATION: Select this one if State or National (VTNE) Exam was taken within the past 5 years: <i>Date of last application</i>: TRANSFER CERTIFICATION FROM ANOTHER STATE: All applicants must take Arizona's State Exam. | | | |
| | ~ PLEASE CHECK | ONE ~ | |
| I will be taking the: | NATIONAL & STATE: NAT | TONAL ONLY: STA | ATE ONLY: |
| Section 1: | PERSONAL INFORMAT | ION | |
| Name: | | Maiden Name: | |
| Mailing Address (Home): | Street | Apt# | City |
| - | State | Zip Code | County |
| Home Phone: () | Cell phone: () | Email: | |
| SSN: | Date of Birth: | Gender: | M: F: |
| Section 2: | EDUCATION AND EMPLOYMEN | NT INFORMATION | |
| | | | |
| | Name of School | | Graduation Date |
| Location of School: | City | | State |

| | Street | City | State | Zip Code |
|---|--|---|--|---|
| Phone Number: () _ | Na | me of Responsible Veterinar | ian: | |
| I am currently not em | nployed at a veterinary | facility. | | |
| Section 3: | | AFFIDAVIT | | |
| | ANSWER : | THE FOLLOWING QUESTI | ONS: | |
| | | tified/registered as a veterina | | |
| laws or rules in any st | ate(s) in which you hav | e you been investigated and ve been licensed/certified/regopy of the Board Order with | gistered? | eterinary technician □ Yes □ No |
| traffic violation, in an submit a certified copreceived a pardon, th whether or not senter | y state or federal court py of Record of Convic e conviction was set as nce was imposed or su | d of or pled nolo contendere? If yes , give a full explanatation and Record of Dispositionside, the records were expurspended. | ion on a separate she on. You must answer nged, your civil rights | eet of paper and "yes" even if you restored and/or |
| If yes, explain below a | | animals? copy of the Record of Convid | | ☐ Yes ☐ No esolution with your |
| duly sworn upon his or he | er oath deposes and s nd the content of this ability and the informa | cays all of the following: I a application. The informatio ation submitted is without fra | m the person named n contained in the ap aud, deceit or misrepr professional associa | in this application. I oplication is true and resentation. I hereby |
| correct to the best of my authorized any past or information to the State of shall have the same effectits successor, to release a any other person, when s | of Arizona in connection at as the original. I also any information submit such request is required tion is cause to deny | on with my application and so authorized the Arizona Stated by me, upon request, to ed or permitted by Arizona Fing application. I authorize | te Veterinary Medical the public or to any li Revised Statutes. I a | of this authorization Examining Board, or censing agency, or to cknowledge that any |
| correct to the best of my authorized any past or information to the State can shall have the same effect its successor, to release any other person, when a falsification in my application interview that is conducted. | of Arizona in connection as the original. I also any information submit such request is require tion is cause to deny dof me in regards to the control of th | on with my application and so authorized the Arizona Stated by me, upon request, to ed or permitted by Arizona Fing application. I authorize | te Veterinary Medical the public or to any li Revised Statutes. I a | of this authorization Examining Board, or censing agency, or to cknowledge that any ecord any application |
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| correct to the best of my authorized any past or information to the State of shall have the same effectits successor, to release a any other person, when a falsification in my application interview that is conducted. Signature of Applicant: | of Arizona in connection as the original. I also any information submit such request is required tion is cause to deny d of me in regards to the submit of t | on with my application and so authorized the Arizona Stated by me, upon request, to ed or permitted by Arizona Fing application. I authorize his application. | te Veterinary Medical the public or to any lic Revised Statutes. I a the Board to tape re | of this authorization Examining Board, or censing agency, or to cknowledge that any ecord any application |
| correct to the best of my authorized any past or information to the State of shall have the same effectits successor, to release a any other person, when stallification in my application interview that is conducted Signature of Applicant: STATE OF COUNTY OF | of Arizona in connection as the original. I also any information submit such request is require tion is cause to deny d of me in regards to the such the such request in the such regards to the such regards | on with my application and so authorized the Arizona Stated by me, upon request, to ed or permitted by Arizona Fing application. I authorize his application. | te Veterinary Medical the public or to any lice Revised Statutes. I a the Board to tape re Date: | of this authorization Examining Board, or Examining Board, or Examining agency, or to |
| correct to the best of my authorized any past or information to the State of shall have the same effectits successor, to release a any other person, when stallification in my application interview that is conducted Signature of Applicant: STATE OF COUNTY OF | of Arizona in connection as the original. I also any information submit such request is require tion is cause to deny d of me in regards to the such the such request in the such regards to the such regards | on with my application and so authorized the Arizona Stated by me, upon request, to ed or permitted by Arizona Fing application. I authorize his application. | te Veterinary Medical the public or to any lice Revised Statutes. I a the Board to tape re Date: | of this authorization Examining Board, or censing agency, or to cknowledge that any ecord any application |

Revised: 5/15/15 Page 2 of 2



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Victoria Whitmore, Executive Director

MORAL CHARACTER REFERENCE FORM

The following applicant will be applying to the State of Arizona for certification as a technician. We request that you furnish us with the requested information as listed below. Please answer the questions to the best of your knowledge. Note: This form is to be completed by persons not related to the applicant. If necessary, you may use a second sheet of paper. Form must be submitted directly to the Board office by individual, not applicant. May be faxed or emailed to: kodi.calais@vetboard.az.gov

| Na | ame of Applicant: | Maiden Name: | | |
|-----|--|---|--------------|-----------------------|
| 1. | Through what context do you know the applicant? | | | |
| 2. | How long have you known the applicant? | (Must be a minimum of 3 ye | ars). | |
| 3. | Is the applicant or any member of his/her family relate If yes, please explain: | | | □ Yes □ No |
| 4. | To your knowledge, has the applicant ever been convanimals? If yes, please explain: | , | | □ Yes □ No |
| 5. | To your knowledge, has the applicant ever failed to b If yes , please explain: | | | |
| 6. | Do you know of any unfavorable incident(s) in the life may have a bearing upon the character or fitness (more questions contained in this questionnaire or disclosed if yes, please explain: | oral or otherwise) to perform prod in your answers? | ofessional d | duties not covered by |
| | | | | |
| Pri | int Your Name:(Please Print Clearly) | Phone: | | |
| | | | | |
| Au | ddress: Street | City | State | Zip |
| Yo | our Signature: | Date: | | |

ARIZONA STATEMENT OF CITIZENSHIP OR ALIEN STATUS FOR STATE PUBLIC BENEFITS

Professional License and Commercial License Arizona State Veterinary Medical Examining Board

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrants, and certain aliens paroled into the United States are eligible to receive state, or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 41-1080 requires, in general, that a person applying for a license must submit documentation to the license agency that satisfactorily demonstrates the applicant's presence in the United States is authorized under federal law.

Directions: All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III.

Submit this completed form and a copy of one or more document(s) from the attached "Evidence of U.S. Citizenship, U.S. National Status, or Alien Status" with your application for license or renewal. If the document you submit does not contain a photograph, you must also provide a government issued document that contains your photograph. You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

| SECTION I – APPLICANT INFORMATION | | |
|--|--|--|
| APPLICANT'S NAME (Print or type) | | |
| TYPE OF APPLICATION (Check one) □ INITIAL APPLICATION □ REAPPLICATION | | |
| TYPE OF LICENSE/CERTIFICATION (Check one) □ DVM □ CVT | | |
| SECTION II – CITIZENSHIP OR NATIONAL STATUS DECLARATION | | |
| Are you a citizen or national of the United States? ☐ Yes ☐ No | | |
| If Yes , indicate place of birth: | | |
| City State (or equivalent) Country or Territory | | |
| If you answered Yes , 1) Attach a legible copy of a document from List A (attached) Name of document | | |
| 2) Go to Section IV. | | |
| If you answered No , you must complete Section III and IV. | | |
| SECTION III – ALIEN STATUS DECLARATION | | |
| To be completed by applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box. Attach a legible copy of a document from List B (Attached) or other document as evidence of your status. Name of document provided | | |
| Qualified Alien Status (8 U.S.C.§§ 1621(a)(1),-1641(b) and (c)) | | |
| ☐ 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA) | | |

| | | APPLICANTS' SIGNATURE DATE |
|-------|-------|--|
| | | |
| | | under penalty of perjury under the laws of the state of Arizona that the answers and evidence I have given and correct to the best of my knowledge. |
| All a | ppl | icants must complete this section. |
| | | SECTION IV - DECLARATION |
| | 14 | A person not described in categories 1-13 who is otherwise lawfully present in the United States. PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure. See 8 U.S.C. § 1621(a). |
| Othe | wise | Lawfully Present |
| | 1 13 | . A foreign national not physically present in the United States. |
| | 12 | . A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 et seq.]; |
| |] 11 | . A nonimmigrant whose visa for entry is related to employment in the United States, or |
| Othe | Pers | ons (8 U.S.C § 1621(c)(2)(A) and (C) |
| | 10 | . An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA |
| Alien | Parol | ed into the United States For Less Than One Year (8 U.S.C. § 1621(a)(3)) |
| | 9. | A nonimmigrant under the Immigration and Nationality Act [8 U.S.C § 1101 et seq.] Nonimmigrants are persons who have temporary status for a specific purpose. See 8 U.S.C § 1101(a)(15). |
| Nonir | nmig | rant Status (8 U.S.C. § 1621(a)(2)) |
| | 3 8. | An alien who has, or whose child or child's parent is a "battered alien" or an alien subject to extreme cruelty in the United States. |
| | 3 7. | An alien who is a Cuban/Haitian entrant. |
| | 1 6. | An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980. |
| | 3 5. | An alien whose deportation is being withheld under Section 243(h) of the INA. |
| | 1 4. | An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA. |
| | 3. | A refugee admitted to the United States under Section 207 of the INA. |
| | 2. | An alien who is granted asylum under Section 208 of the INA. |

EVIDENCE OF U.S. CITIZENSHIP, U.S. NATIONAL STATUS, OR ALIEN STATUS

You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

Evidence showing authorized presence in the United State includes the following:

- 1. An Arizona driver license issued after 1996 or an Arizona non-operating identification license.
- 2. A driver license issued by a state that verifies lawful presence in the United States.
- 3. A birth certificate or delayed birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time)
- 4. A United States certificate of birth abroad.
- 5. A United States passport. ***Passport must be signed***
- 6. A foreign passport with a United States visa.
- 7. An I-94 form with a photograph.
- 8. A United States citizenship and immigration services employment authorization document or refugee travel document.
- 9. A United States certificate of naturalization.
- 10. A United States certificate of citizenship.
- 11. A tribal certificate of Indian blood.
- 12. A tribal or bureau of Indian affairs affidavit of birth.
- 13. Any other license that is issued by the federal government, any other state government, an agency of this state or a political subdivision of this state that requires proof of citizenship or lawful alien status before issuing the license.